## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

**Application or Docket Number** 

09/856818

| (Column 1) (Column 2)  |  |   |                                      |                    |                                 |                  |            | SMALL ENTITY TYPE   |                        | OTHER THAN OR SMALL ENTITY |                     |                        |
|--|--|---|--------------------------------------|--------------------|---------------------------------|------------------|------------|---------------------|------------------------|----------------------------|---------------------|------------------------|
| TOTAL CLAIMS   |  |   |                                      |                    |                                 |                  | ſ          | RATE                | FEE                    | )                          | RATE                | FEE,                   |
| FOR  |  |   | NUMBER                               | NUMBER FILED       |                                 | ER EXTRA         |            | BASIC FEE           | 355.00                 | OR                         | BASIC FEE           | 710.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |   | 33 minus 20=                         |                    | . /                             | 3                |            | X\$ 9=              |                        | OR                         | X\$18=              | 234                    |
| IND  | EPENDENT CL                                    | AIMS                                      | 2. minus 3 = *                       |                    |                                 |                  | Ì          | X40=                |                        | OR                         | X80=                |                        |
| MU   | LTIPLE DEPEN                                   | DENT CLAIM PI                             | RESENT                               |                    |                                 |                  | Ì          | +135=               |                        | OR                         | +270=               |                        |
| * If   | the difference                                 | in column /1 is                           | ess than zero, enter "0" in column 2 |                    |                                 |                  | L          | TOTAL               |                        | OR                         | TOTAL               | 1094                   |
|  | C  | LAIMS AS A                                | MENDED-PART II                       |                    |                                 |                  |            | <b>L</b>            |                        |                            | OTHER THAN          |                        |
| (Column 1)   |  |   | (Column 2)                           |                    |                                 | (Column 3)       |            | SMALL               | NTITY                  | OR                         | SMALL               | ENTITY                 |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                      | NUM<br>PREVI       | MBER<br>OUSLY<br>FOR            | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |                            | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                                | **                 |                                 | =                |            | X\$ 9=              |                        | OR                         | X\$18=              |                        |
|  | Independent                                    | *   | Minus                                | ***                | T CL AIM                        | =                |            | X40=                |                        | OR                         | X80=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |   |                                      |                    |                                 |                  |            | +135=               |                        | OR                         | +270=               |                        |
|  |  |   |                                      |                    |                                 |                  | L          | TOTAL               |                        | ارا                        | TOTAL<br>ADDIT. FEE |                        |
| ADDIT. FEE ADDIT. (Column 2) (Column 3)  |  |   |                                      |                    |                                 |                  |            |                     |                        |                            | A0011.1 EC          |                        |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                      | NUM<br>PREV        | HEST<br>MBER<br>IOUSLY<br>D FOR | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |                            | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  |   | Minus                                | **                 |                                 | =                |            | X\$ 9=              |                        | OR                         | X\$18=              |                        |
| AME  | Independent                                    |   | Minus                                | ***                | = 0.1111                        | =                |            | X40=                |                        | OR                         | X80=                |                        |
| L  | THIRST PRESE                                   | NTATION OF M                              | ULTIPLE DE                           | PENUEN             | II CLAIM                        |                  | <b>ا</b> ا | +135=               |                        | OR                         | +270=               |                        |
|  |  |   |                                      |                    |                                 |                  | L          | TOTAL<br>ADDIT. FEE |                        | OR                         | TOTAL<br>ADDIT, FEE |                        |
| (Column 1) (Column 2) (Column 3)   |  |   |                                      |                    |                                 |                  |            |                     |                        |                            |                     |                        |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                      | HIG<br>NUI<br>PREV | HEST<br>MBER<br>YOUSLY<br>D FOR | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |                            | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                                | **                 |                                 | =                |            | X\$ 9=              |                        | OR                         | X\$18=              |                        |
| AME  | Independent                                    | •   | Minus                                | ***                |                                 | =                |            | X40=                |                        | OR                         | X80=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                      |                    |                                 |                  |            |                     |                        |                            |                     |                        |
| .  | If the entry in colu                           | ımn 1 is less than                        | the entry in col                     | umn 2. wr          | ite "0" in co                   | olumn 3.         |            | +135=<br>TOTAL      |                        | OR                         | +270=               |                        |
| <ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."</li> <li>The "Highest Number Previously Paid For" (Total or Independent) is the highest number for</li> </ul> |  |   |                                      |                    |                                 |                  |            |                     | proprieto bo           | OR                         | TOTAL<br>ADDIT. FEE |                        |